## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-028
Estimated average b	ourden

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Section	1 30(N)	or the i	investme	ent Co	ompany Act	JI 194	40							
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol Aramark [ ARMK ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
FOSS ERIC J														X C	irec	tor	10%	Owner		
(Last) (First) (Middle)					3. [	Date of Earliest Transaction (Month/Day/Year)								$\dashv$		Officer (give title below)		Oth belo	er (specify w)	
ARAMARK				06/09/2014									Chairman, President and CEO			EO				
1101 MARKET STREET				-																
(Ctt)						4. If Amendment, Date of Original Filed (Month/Day/Year) 06/11/2014									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PHILADELPHIA PA 19107			00/	00/11/2014									X Form filed by One Reporting Person							
PHILAD	ELPHIA P	1 .	191	107											F	Form filed by More than One Reporting				
					-										Person					
(City)	(St	ate) (	Zip)	1																
		Tabl	e I	- Non-Deriv	/ative	Sec	uritie	s Ac	quired	, Di	sposed o	f, oı	r Bei	neficia	ally Ov	vne	d			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye		ar) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr. 3, 4 and 5)				Benefici Followin		s Illy Owned g Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership						
						Cod	le V	V Amount			A) or D)	Price	Transaction(s) (Instr. 3 and 4)			(Instr. 4)				
Common Stock 06/09/2			06/09/2014	4			A		2,4	2,463.4725 <sup>(1)(2)</sup> A		A	\$0	1,290,414.2384(2)		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Ex Security or Exercise (Month/Day/Year) if a		Deemed lecution Date, any onth/Day/Year)	ion Date, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		f g lnstr. 3	8. Price Derivati Security (Instr. 5	ivative curity ctr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or No of	umber						

## **Explanation of Responses:**

- 1. Represents dividend equivalent rights in connection with the Issuer's quarterly dividend and accrued to the Reporting Person on restricted stock units held by the Reporting Person. These dividend equivalent rights vest on the same schedules as the underlying awards.
- 2. This Form is being amended to correct the reporting of the number of dividend equivalent rights accrued to the Reporting Person on June 9, 2014 and the resulting balance of securities beneficially owned by the Reporting Person following the transaction, as the original Form 4 incorrectly included dividend equivalents accrued to the Reporting Person which were subject to performance conditions and not reportable until such performance conditions were satisfied.

## Remarks:

/s/ Robert T. Rambo, as Attorney-in-fact

12/21/2015

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.